

## LEGION SPORTS COMPLEX APPLICATION FOR USE

Address					
Phone	Fax		Email		
Event					
Area of Stadium	/ Parking Lot Reques	sted			
Date(s) of Event					
Hours of Event _					
Number of Event	s / Games				
Concession Requ	est (Circle one.)	yes		no	
Alcohol Sales Red	quest (Circle one.)	yes		no	
Proposed Admiss	sion Charge				
Insurance Arran	gements				
Special Services /	Practice Requests				
_	_				

## LONG-TERM CONTRACT APPLICANTS MUST ALSO COMPLETE THE FOLLOWING SECTION.

## PROVIDE AN ORGANIZATIONAL HISTORY

How long has the organization been in existence?

Has the organization	operated under any other i	names? (Please list.)
Has the organization	operated in any other marl	kets? (Please list.)
PRESENT A DEM	ONSTRATED ABILITY	TO PROPERLY MANAGE EVENT
		ushers, box office personnel, parking st of paid staff or volunteers?
_	on employ a general or ever	nt manager that will be on-site for each
Please provide a list	of events the organization	has managed during the past three years
WHAT IS THE PO	OTENTIAL DAMAGE TO	<u>) FACILITY</u>
What is the nature o	f the event? (Circle one.) A	Athletic (Be sport specific.)
Concert/Performanc	e (List type.)	Trade Show/Exhibition
Assembly	Other	
How many events/g	ames will take place during	the contract period?
Is the user requestin	g alcohol concessions?	

## **DESCRIBE THE FINANCIAL CONDITION OF THE ORGANIZATION**

Please attach an organizational balance sheet/cash flow statement and three business references.

We reserve the right to request financial statements and references.

Please submit request a minimum of 30 days prior to the event date
by fax to 910-341-7854 or mail to
City of Wilmington, Parks, Recreation and Downtown Services Department
Attn: Amy Beatty
302 Willard Street, Wilmington, NC 28401